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ABSTRACT

Characteristics which distinguished patients at federally funded rural community mental health centers in 1971 from those at part rural and non-rural centers were explored. Variables examined were: demographic composition (age, color, and sex), socioeconomic characteristics (annual family income, educational attainment, and marital status), primary diagnosis, previous mental health care, and referrals to and from centers. The 295 centers were classified according to: (1) rural--a center serving a catchment area consisting exclusively of rural counties; (2) non-rural--a center serving a catchment area containing no rural county; and (3) part rural--a center serving a mixed catchment area with one or more rural and one or more non-rural counties. Demographically, more rural patient additions were in the dependency age groups, fewer were black, and more were female than were non-rural additions. Rural center additions were characterized by more lower income persons, more persons with low educational attainment, and more married but fewer never married, separated or divorced persons than were part rural and non-rural additions. More rural additions had received previous mental health care. Differentials by rurality in referral disposition upon discontinuation from centers and in diagnosis were relatively minor. (NQ)

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Statistical Note 102

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
Alcohol, Drug Abuse, and Mental Health Administration
NATIONAL INSTITUTE OF MENTAL HEALTH
Division of Biometry
Survey and Reports Branch

PATIENTS AT FEDERALLY FUNDED RURAL COMMUNITY MENTAL HEALTH CENTERS IN 1971

Summary

In a number of ways, patients at federally funded rural community mental health centers in 1971 differed from their counterparts at part rural and non-rural centers. Demographically, relatively more rural patient additions were in the dependency age groups, relatively fewer were black, and relatively more were female than were non-rural additions. In some demographic particulars, rural patients more closely resembled non-rural than part rural patients. In terms of socioeconomic characteristics, rural center additions were characterized by relatively more lower income persons, by relatively more persons with low educational attainment and by relatively more married but fewer never married and separated or divorced persons than were part rural and non-rural additions.

Relatively more rural additions had received no mental health care previous to coming to the center than had part rural and non-rural additions. Although a higher relative percentage of rural additions were referred to centers by non-psychiatric physicians, other differentials in referral source by rurality were generally less marked than were differentials in the variables cited above. Differentials by rurality in referral disposition upon discontinuation from centers and in diagnosis were also relatively minor.

Introduction and Background

Differentials in demographic, diagnostic and other characteristics of patients at federally funded community mental health centers have been described in other Statistical Notes 1/, and it has been shown that there is considerable local variation among the populations served by individual centers 2/. Local variation depends upon the interaction of many complex forces, among which are: the attractiveness of a particular center and the appropriateness of specific services offered there; the existence and accessibility of alternate mental health facilities in the vicinity of the center; the ability of patients to pay privately for psychiatric care; community and individual definitions of departures from "normal" mental health and degrees of tolerance of such departures; attitudes toward all medical treatment and specifically toward mental health care; and, finally, of course, the actual prevalence and distribution of mental illness in the community 3/.

Whether a population is essentially rural or non-rural in character is one of the many variables that interact within the complex web of forces affecting the utilization of mental health services. That rural people who utilize mental health services differ from their non-rural counterparts with respect to a variety of characteristics is well documented in the literature. It is the purpose of the present Note to add to this body of literature by exploring some of the characteristics which distinguished patients at rural community mental health centers in 1971 from their counterparts at part rural and non-rural centers. Among the variables examined are: demographic composition (age, color and sex); selected socioeconomic characteristics (annual family income, educational attainment and marital status); primary diagnosis; previous mental health care; and referrals to and from centers.

March 1974 Leona L. Bachrach, Ph.D.

RC008854

A companion Note, Statistical Note 101, explores differentials by rurality 4/ in utilization indices and funding, expenditure and staffing patterns at community mental health centers during the same year. For both Notes, the 295 operating community mental health centers have been classified according to rurality as follows: A rural center is one serving a catchment area which consists exclusively of rural counties. Rural counties are, by definition, those located outside Standard Metropolitan Statistical Areas and having more than half of their populations living in communities of 2,500 or less. A non-rural center is one which serves a catchment area containing no rural county as defined above. A part rural center is one serving a mixed catchment area with one or more rural and one or more non-rural counties. In 1971, the breakdown of centers by rurality was:

	Number	Percent
All centers.....	295	100.0%
Non-rural.....	175	59.3
Part rural.....	87	29.5
Rural	33	11.2

Most of the analysis in this Note is in terms of patient additions. Additions represent an unduplicated count of persons admitted to care in community mental health centers. They are thus distinguished from admissions, which ordinarily represent duplicated counts and which are more often used in presentations of mental health facility statistics 5/. During 1971, the year under study, there were an estimated 432,640 additions to community mental health centers in the United States. These additions were distributed according to rurality of centers as follows:

	Estimated Number	Percent
All Additions.....	432,640	100.0%
Non-rural.....	306,742	70.9
Part rural.....	93,017	21.5
Rural.....	32,881	7.6

Demographic Characteristics: Age, Color and Sex

Differentials in the demographic composition of community mental health center additions by rurality may be briefly summarized as follows: as compared with non-rural additions, relatively more rural additions were in the dependency age groups, relatively fewer rural additions were black, and relatively more rural additions were female. In some demographic particulars part rural center additions more closely resembled rural additions; in other particulars they more closely resembled non-rural additions. However, additions to part rural centers stood markedly apart in having a notably lower median age, a lower sex ratio and a lower percentage of black additions than did either non-rural or rural additions.

TABLE A. PERCENT DISTRIBUTION OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY AGE AND DEGREE OF RURALITY, UNITED STATES 1971

Age	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Ages.....	100.0%	100.0%	100.0%	100.0%
Under 15.....	14.0	12.3	18.3	17.5
15-19.....	13.2	12.8	15.0	13.2
20-24.....	15.9	17.0	13.5	11.9
25-44.....	37.0	38.4	33.4	33.6
45-64.....	16.4	16.2	16.1	19.2
65 and Over.....	3.5	3.3	3.7	4.6
Number of Facilities Reporting..	192	104	62	26

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Table A and summary Table 1 analyze age distributions of additions to CMHC's for color and sex groups according to rurality 6/. For all community mental health centers combined, the highest representation of patient additions by age (37%) occurred in the 25 to 44 year group. This age group also contained the highest percentages of additions -- ranging from 34 to 40 percent -- in each of the individual color-sex groups when centers in all rurality categories were viewed in combination. Males, white and black alike, had a higher percentage of additions in the under 15 year age group than in either the 15 to 19 or 20 to 24 year groups. Females, by contrast, showed a steady increase in percent distribution of additions from the under 15 year group to the peak representation in the 25 to 44 year group.

When center additions were broken down according to rurality, essentially the same patterns of age distribution were apparent; but some differences in magnitude did occur. Non-rural centers had relatively fewer additions under 15 years of age (12 percent of all additions) than did either part rural or rural centers (18 percent in both instances). The differential was especially marked for males: at non-rural centers, only 16 percent of male additions were under 15 years of age. But at rural centers, as many as 22 percent of male additions were under 15, as were 24 percent at part rural centers. As a consequence, although male additions at both rural and part rural centers still peaked in the 25 to 44 year group, this age group represented only 30 percent of all additions. Female additions at part rural and rural centers also departed from the pattern for all centers combined in showing no steady increase from the under 15 to the peak 25 to 44 year group.

TABLE B. ADDITIONS IN DEPENDENCY AGE GROUPS AS PERCENT OF TOTAL ADDITIONS BY DEGREE OF RURALITY, FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS, UNITED STATES 1971

Age Group	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
		Both Sexes		
Total Additions Under 15 & 65 & Over	17.5%	15.6%	22.0%	22.1%
Under 15	14.0	12.3	18.3	17.5
65 & Over	3.5	3.3	3.7	4.6
		Male		
Total Additions Under 15 & 65 & Over	21.5%	19.2%	27.3%	26.5%
Under 15	18.4	16.3	23.9	22.2
65 & Over	3.1	2.9	3.4	4.3
		Female		
Total Additions Under 15 & 65 & Over	13.9%	12.4%	17.3%	17.8%
Under 15	10.0	8.7	13.3	12.9
65 & Over	3.9	3.7	4.0	4.9
Number of Facilities Reporting	192	104	62	26

Table B compares additions in dependency age groups according to sex and rurality. Part rural and rural centers had substantially higher concentrations of dependency additions for both sexes, especially males, and this was essentially the result of the under 15 experience. There was very little variation among the representations of additions aged 65 and over, either by sex or rurality.

The median age for rural and non-rural additions alike was about 29 years, and this was approximately three years higher than that for part rural additions (Table C). The median age was especially low for part rural male additions at 24 years. In all three rurality categories, the median age for female additions exceeded that for male additions.

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TABLE C. MEDIAN AGE OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY SEX AND DEGREE OF RURALITY, UNITED STATES 1971

Sex	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Additions	28.2	28.6	26.4	28.9
Male	26.4	27.0	24.0	27.4
Female	29.7	30.0	28.4	30.1
Number of Facilities Reporting	192	104	62	26

TABLE D. PERCENT DISTRIBUTION OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY COLOR AND SEX AND DEGREE OF RURALITY, UNITED STATES 1971

Color and Sex	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Additions	100.0%	100.0%	100.0%	100.0%
Male	47.7	47.8	47.2	48.4
Female	52.3	52.2	52.8	51.6
White	78.6	73.4	91.3	90.5
Male	37.3	34.9	43.0	43.9
Female	41.3	38.5	48.3	46.6
Black	16.5	20.4	6.3	8.6
Male	7.9	9.8	3.1	4.0
Female	8.6	10.6	3.2	4.6
Other	4.9	6.2	2.4	0.9
Male	2.5	3.1	1.1	0.5
Female	2.4	3.1	1.3	0.4
Number of Facilities Reporting	192	104	62	26

TABLE E. BLACKS IN SPECIFIED AGE GROUPS AS PERCENT OF TOTAL ADDITIONS BY DEGREE OF RURALITY, FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS 1971

Age	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Ages	16.5%	20.4%	6.3%	8.6%
Under 15	20.3	26.3	10.3	11.2
15-19	15.9	19.9	6.8	9.8
20-24	16.7	20.1	5.4	8.7
25-44	16.7	20.7	4.8	7.7
45-64	13.3	16.7	4.9	7.1
65 & Over	15.2	18.5	8.4	9.0
Number of Facilities Reporting	192	104	62	26

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For centers in all rurality categories combined and irrespective of age, whites represented 79 percent of all additions (Table D). White females had the highest percentage of additions among the color-sex groups and accounted for 41 percent of the total. In fact, white females led in additions for all age groups except the under 15 group, where they represented less than one-third of all additions and were exceeded by white males (summary Table 2). These differentials by color and sex did not, however, persist when the centers were further broken down by rurality. Relatively far more blacks were represented among total additions to non-rural centers, where they accounted for 20 percent of all additions. Blacks accounted for nine percent of all additions to rural centers and six percent of all additions to part rural centers (Table E). The proportion of all additions accounted for by blacks at non-rural centers was at least twice as high as that at rural centers for each individual age group; and in the 25 to 44 year group it was 2.7 times as high.

TABLE F. SEX RATIO (MALES PER 100 FEMALES) OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY DEGREE OF RURALITY, COLOR AND AGE, UNITED STATES 1971*

Degree of Rurality and Color**	All Ages	Age					
		Under 15	15-19	20-24	25-44	45-64	65 & Over
All Centers**.....							
All Additions.....	91	167	88	86	80	85	73
White.....	91	170	89	85	78	86	73
Black.....	92	162	84	86	83	75	68
Other.....	100	145	83	95	97	108	97
Non-Rural Centers**.							
All Additions.....	92	171	88	89	82	83	71
Part-Rural Centers**							
All Additions.....	89	160	88	77	72	86	76
Rural Centers**.....							
All Additions.....	94	161	88	77	76	103	83

* Number of facilities reporting: all centers - 192; non-rural centers - 104; part rural - 62; rural centers - 26.

** Due to the relatively small number of total cases in the black and other categories, sex ratios are presented for color groups only for all catchment areas combined.

The overall excess of female over male additions for all rurality categories is demonstrated in Table F, which presents sex ratios for additions by color and age. For all additions combined, there were 91 males added for every 100 females. The excess of females was greatest at part rural centers, where there were only 89 male additions for every 100 females; and it was lowest at rural centers where the sex ratio was 94. Male additions exceeded female additions in all rurality categories in the under 15 year age group, and among non-rural additions in this group the sex ratio was especially high (171). For all other age groups and for all rurality categories, female additions exceeded male additions except in the age group 45 to 64 in rural areas.

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Selected Socioeconomic Characteristics

There were also rurality differences among community mental health center additions according to selected socioeconomic characteristics, as shown in Tables G through J. Generally speaking, when compared with part rural and non-rural centers, rural centers were characterized by relatively more low income additions; by relatively more additions with low educational attainment; and by relatively more married but fewer never married and separated or divorced additions.

TABLE G. PERCENT DISTRIBUTION OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY ANNUAL FAMILY INCOME AND DEGREE OF RURALITY UNITED STATES 1971

Annual Family Income	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Income	100.0%	100.0%	100.0%	100.0%
None	6.9	6.0	8.4	10.3
Under $2,499	34.6	37.9	23.7	34.0
$2,500 - $4,999	20.5	19.8	22.4	21.7
$5,000 - $7,499	18.0	17.7	19.2	18.0
$7,500 - $9,999	10.5	9.9	13.0	9.3
$10,000 -$14,999	6.5	6.2	8.0	4.8
$15,000 or More	3.0	2.5	5.3	1.9
Median Income	$3,542	$3,267	$4,503	$3,164
Number of Facilities Reporting	139	78	43	18

Table G shows marked differences in median annual family income according to rurality. The median income was lowest -- $3,164 -- at rural centers. By contrast, the median income for additions to part rural centers was $4,503 -- an excess of $1,339 over rural centers. Additions to non-rural centers ranged between these two extremes with a median income of $3,267.

For all age groups combined, additions to part rural centers stood apart from additions to both non-rural and rural centers in the matter of income (Table H). Relatively fewer part rural additions had incomes of $5,000 or less (55%) than did either non-rural (64%) or rural (66%) additions. The relatively smaller representation of additions in this lowest income grouping at part rural centers was also apparent for all individual age groups except the 65 and over group, where about 85 percent of additions in each of the rurality categories had annual incomes of $5,000 or less. At the other end of the income distribution, 13 percent of part rural additions had incomes of $10,000 or more; but this was true for only 9 and 7 percent of non-rural and rural additions, respectively. This differential generally persisted for individual age groups.

Table I indicates that there were also marked differentials in educational attainment by rurality. Close to half of the rural additions had educational attainments of grade school or less, as compared with 20 percent of non-rural additions and 31 percent of part rural additions. By contrast, only 12 percent of rural additions, but 19 and 17 percent of non-rural and part rural additions, respectively, had educational attainments of college or above. These differentials in educational attainment by rurality generally held for all age groups, although it may be noted that, within each rurality grouping, the proportion of additions with grade school or less increased with age. The proportion of additions with college or above, on the other hand, differed considerably less by age.

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TABLE H. PERCENT DISTRIBUTION OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY AGE, ANNUAL FAMILY INCOME AND DEGREE OF RURALITY, UNITED STATES 1971

Age and Annual Family Income	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Ages				
All Incomes	100.0%	100.0%	100.0%	100.0%
Under $5,000	62.0	63.8	54.5	65.9
$5,000 - $9,999	28.5	27.5	32.2	27.4
$10,000 - $14,999	6.5	6.2	8.0	4.8
$15,000 or More	3.0	2.5	5.3	1.9
Under 25				
All Incomes	100.0%	100.0%	100.0%	100.0%
Under $5,000	61.5	63.5	54.2	64.0
$5,000 - $9,999	28.9	27.9	32.1	29.3
$10,000 - $14,999	6.4	6.0	8.1	4.8
$15,000 or More	3.2	2.6	5.6	1.9
25-44				
All Incomes	100.0%	100.0%	100.0%	100.0%
Under $5,000	58.4	60.4	49.5	62.5
$5,000 - $9,999	31.3	30.1	36.1	29.8
$10,000 - $14,999	7.3	7.0	9.1	5.6
$15,000 or More	3.0	2.5	5.3	2.1
45-64				
All Incomes	100.0%	100.0%	100.0%	100.0%
Under $5,000	67.5	69.2	59.8	73.0
$5,000 - $9,999	24.1	23.2	28.3	21.2
$10,000 - $14,999	5.5	5.3	6.6	4.0
$15,000 or More	2.9	2.3	5.3	1.8
65 and Over				
All Incomes	100.0%	100.0%	100.0%	100.0%
Under $5,000	85.2	85.5	84.7	84.3
$5,000 - $9,999	10.7	10.3	10.9	13.4
$10,000 - $14,999	2.8	3.2	1.9	1.7
$15,000 or More	1.3	1.0	2.5	0.6
Number of Facilities Reporting	139	78	43	18

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TABLE I. PERCENT DISTRIBUTION OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY AGE, EDUCATIONAL ATTAINMENT AND DEGREE OF RURALITY, UNITED STATES 1971

Age and Educational Attainment	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Ages*				
All Attainment Levels..	100.0%	100.0%	100.0%	100.0%
Grade School or Less**.	25.1	20.2	31.2	48.9
High School***.....	57.0	60.7	52.2	39.6
College or Above.....	17.9	19.1	16.6	11.5
Under 25*				
All Attainment Levels..	100.0%	100.0%	100.0%	100.0%
Grade School or Less**.	17.4	13.8	21.3	40.1
High School***.....	65.6	68.8	61.7	46.5
College or Above.....	17.0	17.4	17.0	13.4
25-44				
All Attainment Levels..	100.0%	100.0%	100.0%	100.0%
Grade School or Less**.	23.0	18.7	28.1	46.0
High School***.....	56.6	59.5	53.1	41.2
College or Above.....	20.4	21.8	18.8	12.8
45-64				
All Attainment Levels..	100.0%	100.0%	100.0%	100.0%
Grade School or Less**.	38.5	31.5	46.7	62.1
High School***.....	46.4	51.3	40.4	30.6
College or Above.....	15.1	17.2	12.9	7.3
65 and Over				
All Attainment Levels..	100.0%	100.0%	100.0%	100.0%
Grade School or Less**.	60.4	54.4	68.2	71.8
High School***.....	29.9	35.0	23.3	20.1
College or Above.....	9.7	10.6	8.5	8.1
Number of Facilities Reporting.....	179	94	60	25

* Additions aged 15 years and older

** Including special education and no education

*** Including vocational, business or technical school

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TABLE 3. PERCENT DISTRIBUTION OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY AGE, MARITAL STATUS AND DEGREE OF RURALITY, UNITED STATES 1971

Age and Marital Status	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Ages*				
All Marital Statuses.....	100.0%	100.0%	100.0%	100.0%
Never Married.....	33.7	34.8	31.6	29.8
Married.....	42.3	38.7	50.3	51.1
Separated or Divorced....	19.5	22.1	13.6	13.4
Widowed.....	4.5	4.4	4.5	5.7
Under 25*				
All Marital Statuses.....	100.0%	100.0%	100.0%	100.0%
Never Married.....	67.1	66.9	67.2	69.0
Married.....	22.1	21.3	24.5	22.3
Separated or Divorced....	10.4	11.5	7.6	8.4
Widowed.....	0.4	0.3	0.7	0.3
25-44				
All Marital Statuses.....	100.0%	100.0%	100.0%	100.0%
Never Married.....	18.5	20.2	14.4	15.1
Married.....	53.7	48.6	65.9	64.9
Separated or Divorced....	25.7	29.1	17.7	18.0
Widowed.....	2.1	2.1	2.0	2.0
45-64				
All Marital Statuses.....	100.0%	100.0%	100.0%	100.0%
Never Married.....	13.8	14.3	13.2	11.4
Married.....	52.4	47.6	61.2	64.3
Separated or Divorced....	23.2	27.3	16.0	13.0
Widowed.....	10.6	10.8	9.6	11.3
65 and Over				
All Marital Statuses.....	100.0%	100.0%	100.0%	100.0%
Never Married.....	13.5	15.0	11.9	8.8
Married.....	40.7	36.8	47.8	47.2
Separated or Divorced....	10.9	12.6	8.2	7.1
Widowed.....	34.9	35.6	32.1	36.9
Number of Facilities Reporting.....	195	102	66	27

* Additions aged 15 years and older

With respect to marital status, Table 3 shows that, relative to non-rural additions, there were fewer rural additions in the never married and separated or divorced categories and more rural additions in the married category. Thirty percent of rural additions were never married, as compared with 35 percent of non-rural additions. At the same time, 13 percent of rural additions were separated or divorced, as compared with 22 percent of non-rural additions. By contrast, 51 percent of rural additions but only 39 percent of non-rural additions were married. Part rural percentages fell between the rural and non-rural extremes in all three of these marital status groupings. Rurality differences among additions in the widowed category were negligible. By age, rurality differences were especially apparent in the 45 to 64 year age group. For example, in this age group, the percentage of non-rural additions who were separated or divorced was more than twice that of rural additions.

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TABLE K. PERCENT DISTRIBUTION OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY PRIMARY DIAGNOSIS AND DEGREE OF RURALITY, UNITED STATES 1971*

Primary Diagnosis	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Diagnoses	100.0%	100.0%	100.0%	100.0%
Mental Retardation	4.6	2.5	7.4	12.0
Organic Brain Syndromes	3.0	2.4	4.1	4.3
Schizophrenia	15.8	17.2	12.8	15.8
Affective & Depressive Disorders	18.4	18.8	17.9	16.7
Psychotic Disorders (not elsewhere classified)	2.2	2.4	1.9	1.7
Alcohol Disorders	9.1	10.7	5.6	8.3
Drug Disorders	4.5	5.8	2.0	1.8
Behavior Disorders of Childhood & Adolescence	13.1	12.9	14.5	9.6
All Other	29.3	27.3	33.8	29.8
Number of Facilities Reporting	165	85	60	20

* See footnote 7 for a detailed description of diagnostic categories used

Primary Diagnosis [1/]

Table K and summary Tables 3 and 4 contain diagnostic data for 1971 additions to CMHC's by rurality. Variations in primary diagnosis were generally not so marked as were variations in other patient characteristics; but some differences were apparent and may be noted. Mental retardation occurred with markedly higher frequency among rural additions than among part rural or non-rural additions: 12 percent of rural additions received this diagnosis, as compared with 7 percent of part rural and 3 percent of non-rural additions. On the other hand, relative to non-rural additions, fewer rural additions had diagnoses of schizophrenia, affective and depressive disorders, alcohol disorders, drug disorders and behavior disorders of childhood and adolescence. Summary Table 3 shows the distribution of primary diagnoses for individual age groups within rurality categories, and summary Table 4 distributes each diagnosis by age within rurality categories. Affective and depressive disorders was the leading primary diagnosis in all rurality categories alike. This diagnosis accounted for 17 percent of all diagnoses among rural additions, 18 percent among part rural additions and 19 percent among non-rural additions. Figure 1, in fact, shows a marked similarity in the four leading primary diagnoses for the rurality categories. Non-rural additions included alcohol disorders among, and excluded mental retardation from, the four leading diagnoses, while the reverse was true for part rural and rural additions. Exclusive of this difference, the two remaining leading diagnoses in all rurality categories were schizophrenia and behavior disorders of childhood and adolescence.

Location of Previous Mental Health Care

According to Table L, 56 percent of additions to rural community mental health centers in 1971 had received no previous mental health care. Respective figures for part rural and non-rural additions were 54 and 49 per cent. Of those additions who had received care previously, relatively minor variations were seen to exist according to rurality.

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FIGURE 1. Four Leading Primary Diagnoses for Rurality Categories, Additions to Federally Funded Community Mental Health Centers, United States 1971

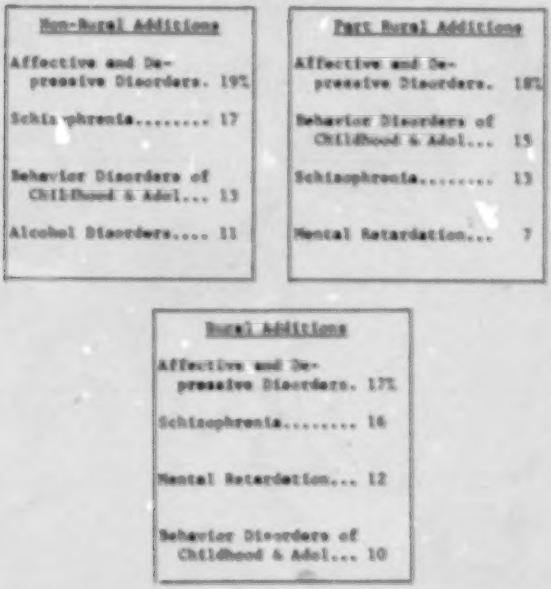

TABLE 1. PERCENT DISTRIBUTION OF ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY LOCATION OF PREVIOUS MENTAL HEALTH CARE RECEIVED AND DEGREE OF RURALITY, UNITED STATES 1971

Location of Previous Care	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Additions	100.0%	100.0%	100.0%	100.0%
No Previous Care Received	50.6	48.5	53.8	55.8
Previous Care Received at:				
Public Psychiatric Hospitals	9.3	9.8	8.4	8.4
Other Psychiatric Hospitals*	4.7	4.5	3.9	3.0
Other Community Mental Health Centers	1.7	1.8	1.7	1.0
Other Mental Health Inpatient facilities	1.1	1.2	1.0	1.0
Outpatient Mental Health Clinics	2.9	2.7	3.5	2.9
Private Practice Mental Health Professionals	4.4	4.6	4.2	2.4
Other	5.1	6.1	3.0	5.0
This Center Only	12.1	11.7	12.7	13.1
Combination of Above:				
Including Public Psychiatric Hospitals	4.7	5.1	4.1	3.4
Not Including Public Psychiatric Hospitals	3.9	4.0	3.7	4.0
Number of Facilities Reporting	189	98	67	24

* Includes psychiatric inpatient units of general hospitals

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TABLE M. PERCENT DISTRIBUTION ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY REFERRAL SOURCE AND DEGREE OF RURALITY, UNITED STATES 1971

Referral Source	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Referral Sources	100.0%	100.0%	100.0%	100.0%
Self, Family or Friend	37.3	38.6	35.6	31.8
Clergy	1.3	1.0	1.8	1.7
Nonpsychiatric Physician	11.2	8.1	15.8	22.3
Private Practice Mental Health Professional	4.2	4.9	3.4	1.8
Public Psychiatric Hospital	4.9	4.7	5.2	5.3
Other Psychiatric Hospital*	2.4	2.7	1.9	1.2
Other CMHC	2.0	2.3	1.2	1.3
Other Nonpsychiatric Hospital or Medical Facility	6.9	8.3	4.3	3.7
Outpatient Mental Health Clinic	1.9	2.4	1.1	0.6
School System	7.9	6.7	10.7	9.3
Social or Community Agency	9.5	9.1	10.0	11.6
Court, Law Enforcement or Correctional Agency	6.3	6.8	5.1	5.6
Other	4.2	4.4	3.9	3.8
Number of Facilities Reporting	221	116	75	30

* Includes psychiatric inpatient units of general hospitals

TABLE N. PERCENT DISTRIBUTION OF DISCONTINUATIONS FROM FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS BY REFERRAL DISPOSITION AND DEGREE OF RURALITY, UNITED STATES 1971

Disposition -- Referral from Center to:	All Centers	Degree of Rurality		
		Non-Rural	Part Rural	Rural
All Discontinuations	100.0%	100.0%	100.0%	100.0%
Public Psychiatric Hospital	5.3	6.0	3.6	3.9
Other Psychiatric Hospital*	1.8	2.1	0.9	1.4
Other CMHC	2.1	2.4	1.7	1.1
Nursing Home	0.8	0.8	0.	0.4
Other Nonpsychiatric Inpatient Facility	1.6	1.9	1.0	0.6
Outpatient Mental Health Clinic	3.8	4.0	3.9	1.0
Private Practice Mental Health Professional	5.5	6.6	3.3	1.2
Social or Community Agency	5.5	5.2	6.1	6.2
Nonpsychiatric Physician	3.3	2.4	4.7	8.6
Not Referred Elsewhere: In Need of Further Mental Health Services	22.7	23.7	19.8	21.7
Not In Need of Further Mental Health Services**	35.6	36.0	34.4	35.2
Other	12.0	8.9	19.8	18.7
Number of Facilities Reporting	207	113	68	26

* Includes psychiatric inpatient units of general hospitals
** Includes deaths

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Referrals To and From Centers

Of the estimated 432,640 additions to all centers during 1971, over one-third were referred by personal contacts (self, family or friends); of the estimated 346,364 discontinuations 8 / during the same period, over one-third were judged to be not in need of further mental health services and were not referred elsewhere. Tables M and N, respectively, show rurality differences in distributions of referral sources for additions to, and referral dispositions for discontinuations from, community mental health centers.

Self, family or friend was by far the most frequently occurring referral source in all rurality categories, although somewhat fewer rural additions (32 percent of all additions) listed this source than did part rural and non-rural (36 and 39 percent of all additions, respectively). Nonpsychiatric physicians accounted for 22 percent of rural referrals, 16 percent of part rural referrals and 8 percent of non-rural referrals.

Differences by rurality in referrals from centers were relatively minor. In addition to those discontinuations in each rurality category (between 34 and 36 percent) who were judged not in need of further mental health care and were discontinued without referral, an additional 24 percent at non-rural centers were discontinued without referral, even though they were judged to require further care. Corresponding percentages for rural and part rural discontinuations were 22 and 20 percent, respectively. Since respondents to the questionnaire were not asked to indicate the reason no referral was made in these cases, explanation of the statistics is somewhat speculative. It may be assumed, however, that a portion of the patients in this group were not desirous of further mental health care. Also included were some patients who had "dropped out" of treatment; terminations of such persons were more on the order of bookkeeping procedures than formal discharges since no opportunity was available to make referral recommendations to these patients at the time of discontinuation.

Methodological Addendum

Completeness of reporting -- The statistics presented in this Note have been derived from the annual Inventory of Community Mental Health Centers. The Inventory is conducted in January of each year by the Biometry Branch of the NIMH in cooperation with State mental health authorities. The validity of the statistics presented here rests in part on completeness of reporting of Inventory items. Actually, incomplete reporting may result from a variety of factors -- i.e., (i) failure of individual centers to return questionnaires; (ii) failure of responding centers to answer selected items on questionnaires; and (iii) failure of responding centers to provide adequate or usable responses for selected items on questionnaires.

As for the first source of incompleteness noted above, 270, or 92 percent, of the 295 centers returned Inventory questionnaires. This type of incompleteness was correlated with number of years of center operation, with the highest incidence of nonresponse occurring among centers in operation less than 1½ years. Incompleteness resulting from the second and third factors noted above varied considerably for individual Inventory items. Among the data covered in this report, reporting was most complete for referral source and disposition and least complete for income and diagnosis. Each of the tables presented in this Note shows, either as the bottom-line entry or in an accompanying footnote, the number of facilities reporting (i.e., providing usable responses for) questions relevant to the data contained therein. It is thus possible for the reader to assess completeness of reporting by computing the percentages for centers responding on a given question in relation to all centers in that rurality category, as shown on page 2 . Thus, if for a particular question, 140 non-rural and 25 rural centers responded, the percent completeness of reporting would be 80 percent for non-rural centers (140 out of 175) and 76 percent for rural centers (25 out of 33).

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Comparability of tabular material with other Statistical Notes -- The reader will note that percent distributions and other statistical measures as presented in this report may differ somewhat from those presented in earlier Statistical Notes (and other unpublished materials) dealing with community mental health center data for 1971. Such discrepancies arise from differences in numbers of facilities reporting Inventory items. Each table in this Note contains data for a minimum of two variables, and the number of facilities reporting corresponds with the number providing responses for the least completely reported variable.

Footnotes and References

1/ Other Statistical Notes in this series dealing with community mental health centers in 1971 are:

86 - "Center and Catchment Area Variations in the Age, Color and Sex Distributions of Additions to 69 Selected Community Mental Health Centers, United States 1971," June 1973 (by Leona L. Bachrach)
87 - "General Characteristics of Additions to Federally Funded Community Mental Health Centers During 1971," July 1973 (by Leona L. Bachrach)
88 - "Additions to Federally Funded Community Mental Health Centers During 1971: Age, Sex and Diagnostic Differences by Service to Which First Admitted," July 1973 (by Leona L. Bachrach)
89 - "Referrals To and From Federally Funded Community Mental Health Centers, United States 1971," July 1973 (by Leona L. Bachrach)
91 - "Sources of Funds, Federally Funded Community Mental Health Centers 1971," August 1973 (by Rosalyn D. Bass)
94 - "Outpatient Treatment Services in Federally Funded Community Mental Health Centers, 1971," September 1973 (by Rosalyn D. Bass and Michael Witkin)
95 - "Inpatient Treatment Services in Federally Funded Community Mental Health Centers, 1971," September 1973 (by Michael Witkin and Rosalyn D. Bass)
96 - "Day Care Services in Federally Funded Community Mental Health Centers, 1971-72," October 1973 (by Carl A. Taube)
101 - "Characteristics of Federally Funded Rural Community Mental Health Centers in 1971," March 1974, (by Leona L. Bachrach)

2/ The terms community mental health center, CMHC and center are used interchangeably in this Note.

3/ The literature contains numerous discussions of these complex conditions. Some selected references relating particularly to the subject matter of this Note, are: Edgerton, J.Wilbert and Bentz, W. Kenneth, "Attitudes and Opinions of Rural People about Mental Illness and Program Services," American Journal of Public Health 59, March 1969, pp. 470-477; Edgerton, J.Wilbert, Bentz, Willard K., and Hollister, William G., "Epidemiological Data for Mental Health Center Planning: III. Demographic Factors and Responses to Stress among Rural People," American Journal of Public Health 60, June 1970, pp. 1065-1071; Kraenzel, Carl F. and Macdonald, Frances H., "Social Forces in Rural Communities of Sparsely Populated Areas," Montana Agricultural Experiment Station Bulletin No.647. Bozeman, Montana: Montana State University, February 1971; Michaux, Mary H., et al., "Relatives' Perceptions of Rural and Urban Day Care Patients," Psychiatry 36, May 1973, pp.203-212; and Srole, Leo, "Urbanization and Mental Health: Some Reformulations," American Scientist 60, September-October 1972, pp.576-583. Also see other references cited in Statistical Note 101.

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4/ Definitions of rural and non-rural as used in this Note differ from residence location definitions utilized in earlier Statistical Notes, and the data are, therefore, not precisely comparable.

Although the term "rurality" has not had wide currency, it has appeared in the literature of the field of rural sociology with some frequency. See Statistical Note 101 for discussions of the concept of rurality and the difficulties inherent in identifying rural community mental health centers.

5/ The count of patient additions may include readmissions (i.e., persons previously treated in the center), so long as their earlier admission occurred prior to the study period. However, a patient admitted more than once during the study period was counted as a single addition.

6/ Nonwhites other than blacks accounted for only five percent of all additions. Because of their small absolute number, discussion in the text is limited to whites and blacks. Statistics for other nonwhites are, however, shown in a number of tables presented in this Note.

7/ The diagnostic categories used in this Note are defined in terms of the Diagnostic and Statistical Manual - DSM II, American Psychiatric Association, as follows:

Diagnostic Grouping	APA Codes Included
Mental Retardation	310-315
Organic Brain Syndromes (excluding alcohol and drug)	290, 292, 293, 294 (except 294.3), 309 (except 309.13, 309.14)
Schizophrenia	295
Affective and Depressive Disorders (including psychotic depressive disorders and depressive neuroses)	296, 298.0, 300.4
Psychotic Disorders (not elsewhere classified)	297, 298.1-299
Alcohol Disorders	291, 209.13, 303
Drug Disorders	294.3, 309.14,304
Behavior Disorders of Childhood and Adolescence (including adjustment reactions of infancy, childhood and adolescence)	307.0- 307.2, 308
All Other	All Other Codes

8/ Discontinuations may be defined as patients terminating all direct services at the center during the year. Included in the definition are deaths, discharges and transfers out to other facilities. Transfers within the center itself -- i.e., from one service to another -- are not included.

0016

TABLE 1. PERCENT DISTRIBUTION OF COLOR AND SEX GROUPS BY AGE AND DEGREE OF RURALITY, ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS, UNITED STATES 1971*

Color and Sex	All Ages	Age					
		Under 15	15-19	20-24	25-44	45-64	65 & Over
				All Centers**			
All Additions..	100.0%	14.0	13.2	15.9	37.0	16.4	3.5
Male.....	100.0%	18.4	13.0	15.4	34.3	15.8	3.1
Female.....	100.0%	10.0	13.5	16.3	39.4	16.9	3.9
White.....	100.0%	13.5	13.2	15.7	36.7	17.3	3.6
Male.....	100.0%	17.9	13.1	15.2	33.8	16.8	3.2
Female.....	100.0%	9.5	13.3	16.1	39.4	17.7	4.0
Black.....	100.0%	17.3	12.8	16.1	37.3	13.3	3.2
Male.....	100.0%	22.3	12.2	15.5	35.4	11.9	2.7
Female.....	100.0%	12.6	13.4	16.6	39.1	14.6	3.7
Other.....	100.0%	11.8	15.4	18.1	39.6	13.0	2.1
Male.....	100.0%	14.0	14.0	17.5	39.0	13.5	2.0
Female.....	100.0%	9.6	16.8	18.6	40.3	12.6	2.1
				Non-Rural Centers**			
All Additions..	100.0%	12.3	12.8	17.0	38.4	16.2	3.3
Male.....	100.0%	16.3	12.5	16.7	36.2	15.4	2.9
Female.....	100.0%	8.7	13.0	17.3	40.4	16.9	3.7
				Part Rural Centers**			
All Additions..	100.0%	18.3	15.0	13.5	33.4	16.1	3.7
Male.....	100.0%	23.9	14.9	12.4	29.6	15.8	3.4
Female.....	100.0%	13.3	15.1	14.4	36.8	16.4	4.0
				Rural Centers**			
All Additions..	100.0%	17.5	13.2	11.9	33.6	19.2	4.6
Male.....	100.0%	22.2	12.8	10.7	29.9	20.1	4.3
Female.....	100.0%	12.9	13.6	13.1	37.1	18.4	4.9

* Number of facilities reporting: all centers - 192; non-rural centers - 104; part rural centers - 62; rural centers - 26.

** Due to the relatively small number of total cases in the black and other categories, age distributions are broken down by color and sex only for all catchment areas combined.

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TABLE 2. PERCENT DISTRIBUTION OF AGE GROUPS BY COLOR AND SEX AND DEGREE OF RURALITY, ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS, UNITED STATES 1971*

Color and Sex	All Ages	Age					
		Under 15	15-19	20-24	25-44	45-64	65 & Over
				All Centers			
All Additions..	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Male.....	47.7	62.6	46.8	46.2	44.3	46.0	42.2
Female.....	52.3	37.4	53.2	53.8	55.7	54.0	57.8
White.....	78.6	75.5	78.4	77.6	78.0	82.8	81.9
Male.....	37.3	47.5	37.0	35.7	34.1	38.3	34.6
Female.....	41.3	28.0	41.4	41.9	43.9	44.5	47.3
Black.....	16.5	20.3	15.9	16.7	16.7	13.3	15.2
Male.....	7.9	12.6	7.2	7.7	7.6	5.7	6.2
Female.....	8.6	7.7	8.7	9.0	9.1	7.8	9.0
Other.....	4.9	4.2	5.7	5.7	5.3	3.9	2.9
Male.....	2.5	2.5	2.6	2.8	2.6	2.0	1.4
Female.....	2.4	1.7	3.1	2.9	2.7	1.9	1.5
				Non-Rural Centers			
All Additions..	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Male.....	47.8	63.1	46.8	47.0	45.1	45.5	41.5
Female.....	52.2	36.9	53.2	53.0	54.9	54.5	58.5
White.....	73.4	68.5	73.0	73.2	72.9	78.2	77.6
Male.....	34.9	43.6	34.6	34.4	32.4	35.7	32.2
Female.....	38.5	24.9	38.4	38.8	40.5	42.5	45.4
Black.....	20.4	26.3	19.9	20.1	20.7	16.7	18.5
Male.....	9.8	16.4	9.0	9.3	9.5	7.1	7.4
Female.....	10.6	9.9	10.9	10.8	11.2	9.6	11.1
Other.....	6.2	5.2	7.1	6.7	6.4	5.1	3.9
Male.....	3.1	3.1	3.2	3.3	3.2	2.7	1.9
Female.....	3.1	2.1	3.9	3.4	3.2	2.4	2.0

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TABLE 2. PERCENT DISTRIBUTION OF AGE GROUPS BY COLOR AND SEX AND DEGREE OF RURALITY, ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS, UNITED STATES 1971* (Continued)

Color and Sex	All Ages	Age					
		Under 15	15-19	20-24	25-44	45-64	65 & Over
				Part Rural Centers			
All Additions..	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Male.....	47.2	61.6	46.8	43.6	41.8	46.2	43.1
Female.....	52.8	38.4	53.2	56.4	58.2	53.8	56.9
White.....	91.3	86.7	89.9	92.4	92.8	93.7	90.4
Male.....	43.0	53.7	42.0	40.2	38.9	43.5	38.6
Female.....	48.3	33.0	47.9	52.2	53.9	50.2	51.8
Black.....	6.3	10.3	6.8	5.4	4.8	4.9	8.4
Male.....	3.1	6.2	3.3	2.4	1.9	2.1	3.8
Female.....	3.2	4.1	3.5	3.0	2.9	2.8	4.6
Other.....	2.4	3.0	3.3	2.2	2.4	1.4	1.2
Male.....	1.1	1.7	1.5	1.0	1.0	0.6	0.7
Female.....	1.3	1.3	1.8	1.2	1.4	0.8	0.5
				Rural Centers			
All Additions..	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Male.....	48.4	61.7	46.8	43.4	43.0	50.6	45.2
Female.....	51.6	38.3	53.2	56.6	57.0	49.4	54.8
White.....	90.5	88.2	88.7	90.1	91.4	92.2	90.7
Male.....	43.9	54.8	41.7	39.3	39.6	46.6	41.3
Female.....	46.6	33.4	47.0	50.8	51.8	45.6	49.4
Black.....	8.6	11.2	9.8	8.7	7.7	7.1	9.0
Male.....	4.0	6.5	4.4	3.5	3.0	3.6	3.6
Female.....	4.6	4.7	5.4	5.2	4.7	3.5	5.4
Other.....	0.9	0.6	1.5	1.2	0.9	0.7	0.3
Male.....	0.5	0.4	0.7	0.6	0.4	0.4	0.3
Female.....	0.4	0.2	0.8	0.6	0.5	0.3	0.0

* Number of facilities reporting: all centers - 192; non-rural centers - 104; part rural centers - 62, rural centers - 26

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TABLE 3. PERCENT DISTRIBUTION OF AGE GROUPS, BY PRIMARY DIAGNOSIS AND DEGREE OF RURALITY, ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS, UNITED STATES 1971*

Primary Diagnosis	All Ages	Age and Degree of Rurality					
		Under 15	15-19	20-24	25-44	45-64	65 & Over
				All Centers			
All Diagnoses	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Mental Retardation	4.6	14.1	6.1	3.4	2.4	2.1	1.2
Organic Brain Syndromes	3.0	2.3	1.3	1.5	1.5	4.2	27.1
Schizophrenia	15.8	2.1	8.9	18.3	20.6	20.8	12.3
Affective & Depressive Disorders	18.4	2.3	11.1	21.3	22.3	25.0	24.4
Psychotic Disorders (not elsewhere classified)	2.2	0.4	1.2	2.4	2.3	3.5	4.4
Alcohol Disorders	9.1	0.1	0.8	3.0	12.1	20.9	9.2
Drug Disorders	4.5	0.7	7.3	10.6	4.2	1.5	1.2
Behavior Disorders of Childhood & Adolescence	13.1	57.9	37.6	0.0	0.0	0.0	0.0
All Other	29.3	20.1	25.7	39.5	34.6	22.0	20.2
				Non-Rural Centers			
All Diagnoses	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Mental Retardation	2.5	8.3	3.6	1.9	1.3	0.9	0.7
Organic Brain Syndromes	2.4	2.1	1.1	1.1	1.2	3.5	23.9
Schizophrenia	17.2	2.3	9.7	19.8	21.7	22.2	15.5
Affective & Depressive Disorders	18.8	2.5	12.9	22.2	22.7	23.0	24.8
Psychotic Disorders (not elsewhere classified)	2.4	0.2	1.2	2.7	2.4	4.0	5.0
Alcohol Disorders	10.7	0.1	1.0	3.0	14.2	25.5	11.6
Drug Disorders	5.8	0.8	8.8	13.0	5.7	2.0	1.4
Behavior Disorders of Childhood & Adolescence	12.9	63.0	35.4	0.0	0.0	0.0	0.0
All Other	27.3	20.7	26.3	36.3	31.8	18.9	17.1

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TABLE 3. PERCENT DISTRIBUTION OF AGE GROUPS, BY PRIMARY DIAGNOSIS AND DEGREE OF RURALITY, ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS, UNITED STATES 1971* (Continued)

Primary Diagnosis	All Ages	Age and Degree of Rurality					
		Under 15	15-19	20-24	25-44	45-64	65 & Over
				Part Rural			
All Diagnoses	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Mental Retardation	7.4	19.8	9.3	6.9	4.1	3.5	1.5
Organic Brain Syndromes	4.1	2.8	1.7	2.3	2.3	5.3	31.0
Schizophrenia	12.8	1.6	7.5	13.5	17.2	18.3	7.6
Affective & Depressive Disorders	17.9	2.2	7.9	19.7	21.8	28.3	24.7
Psychotic Disorders (not elsewhere classified)	1.9	0.7	1.1	1.7	2.0	2.9	4.4
Alcohol Disorders	5.6	0.1	0.4	2.7	7.2	12.6	5.5
Drug Disorders	2.0	0.5	4.7	5.0	1.4	0.8	1.1
Behavior Disorders of Childhood & Adolescence	14.5	54.4	43.4	0.0	0.0	0.0	0.0
All Other	33.8	17.9	24.0	48.2	44.0	28.3	24.2
				Rural Centers			
All Diagnoses	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Mental Retardation	12.0	35.5	14.5	8.8	6.9	4.8	2.8
Organic Brain Syndromes	4.3	1.8	1.4	2.2	2.2	4.9	31.9
Schizophrenia	15.8	2.5	8.0	17.4	23.4	19.6	10.5
Affective & Depressive Disorders	16.7	1.3	7.6	16.2	19.7	28.3	21.0
Psychotic Disorders (not elsewhere classified)	1.7	1.2	1.0	1.9	1.6	2.7	1.5
Alcohol Disorders	8.3	0.0	1.0	4.0	11.5	16.3	7.5
Drug Disorders	1.8	1.0	4.7	2.7	1.6	0.8	0.4
Behavior Disorders of Childhood & Adolescence	9.6	33.2	33.1	0.0	0.0	0.0	0.0
All Other	29.8	23.5	28.7	46.8	33.1	22.6	24.4

* See footnote 7 for a description of diagnostic categories used. Number of facilities reporting: all centers - 165; non-rural centers - 85; part rural centers - 60; rural centers - 20.

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TABLE 4. PERCENT DISTRIBUTION OF PRIMARY DIAGNOSIS GROUPS BY AGE AND DEGREE OF RURALITY, ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS, UNITED STATES 1971*

Primary Diagnosis	All Ages	Age and Degree of Rurality					
		Under 15	15-19	20-24	25-44	45-64	65 & Over
				All Centers			
All Diagnoses	100.0%	14.1	13.2	14.6	36.5	17.8	3.8
Mental Retardation	100.0%	43.4	17.6	10.8	19.2	8.0	1.0
Organic Brain Syndromes	100.0%	10.5	5.7	7.0	18.4	24.5	33.9
Schizophrenia	100.0%	1.9	7.5	16.8	47.5	23.4	2.9
Affective & Depressive Disorders	100.0%	1.8	8.0	16.8	44.1	24.3	5.0
Psychotic Disorders (not elsewhere classified)	100.0%	2.7	7.0	16.0	38.0	28.7	7.6
Alcohol Disorders	100.0%	0.2	1.2	4.8	48.8	41.1	3.9
Drug Disorders	100.0%	2.3	21.5	34.5	34.6	6.1	1.0
Behavior Disorders of Childhood & Adolescence	100.0%	62.1	37.9	0.0	0.0	0.0	0.0
All Other	100.0%	9.6	11.7	19.6	43.1	13.4	2.6
				Non-Rural Centers			
All Diagnoses	100.0%	13.2	12.9	16.2	37.4	17.0	3.3
Mental Retardation	100.0%	43.6	18.5	12.0	18.8	6.2	0.9
Organic Brain Syndromes	100.0%	11.3	5.9	7.6	17.9	24.7	32.6
Schizophrenia	100.0%	1.8	7.3	18.7	47.3	21.9	3.0
Affective & Depressive Disorders	100.0%	1.7	8.9	19.1	45.2	20.7	4.4
Psychotic Disorders (not elsewhere classified)	100.0%	1.0	6.6	18.2	38.8	28.4	7.0
Alcohol Disorders	100.0%	0.2	1.2	4.6	49.8	40.6	3.6
Drug Disorders	100.0%	1.9	19.3	35.9	36.3	5.8	0.8
Behavior Disorders of Childhood & Adolescence	100.0%	64.6	35.4	0.0	0.0	0.0	0.0
All Other	100.0%	10.0	12.4	21.5	42.3	11.7	2.1

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TABLE 4. PERCENT DISTRIBUTION OF PRIMARY DIAGNOSIS GROUPS BY AGE AND DEGREE OF RURALITY, ADDITIONS TO FEDERALLY FUNDED COMMUNITY MENTAL HEALTH CENTERS, UNITED STATES 1971* (Continued)

Primary Diagnosis	All Ages	Age and Degree of Rurality					
		Under 15	15-19	20-24	25-44	45-64	65 & Over
				Part Rural			
All Diagnoses	100.0%	15.4	14.2	11.7	35.4	18.9	4.4
Mental Retardation	100.0%	41.4	17.8	11.0	19.8	9.1	0.9
Organic Brain Syndromes	100.0%	10.3	5.9	6.6	19.4	24.3	33.5
Schizophrenia	100.0%	1.9	8.3	12.5	47.7	27.0	2.6
Affective & Depressive Disorders	100.0%	1.9	6.2	12.9	43.0	29.9	6.1
Psychotic Disorders (not elsewhere classified)	100.0%	5.8	8.0	10.5	37.4	28.1	10.2
Alcohol Disorders	100.0%	0.3	1.0	5.6	45.7	43.0	4.4
Drug Disorders	100.0%	3.6	33.3	29.1	24.4	7.3	2.3
Behavior Disorders of Childhood & Adolescence	100.0%	57.8	42.2	0.0	0.0	0.0	0.0
All Other	100.0%	8.2	10.0	16.7	46.1	15.8	3.2
				Rural Centers			
All Diagnoses	100.0%	16.2	12.7	11.2	32.6	21.6	5.7
Mental Retardation	100.0%	48.0	15.3	8.2	18.6	8.6	1.3
Organic Brain Syndromes	100.0%	6.8	4.1	5.8	16.9	24.4	42.0
Schizophrenia	100.0%	2.5	6.4	12.3	48.2	26.8	3.8
Affective & Depressive Disorders	100.0%	1.3	5.8	10.8	38.4	36.6	7.1
Psychotic Disorders (not elsewhere classified)	100.0%	11.1	7.2	12.0	30.8	34.1	4.8
Alcohol Disorders	100.0%	0.0	1.5	5.5	45.4	42.5	5.1
Drug Disorders	100.0%	9.3	33.3	16.8	29.9	9.3	1.4
Behavior Disorders of Childhood & Adolescence	100.0%	56.2	43.8	0.0	0.0	0.0	0.0
All Other	100.0%	12.8	12.2	17.6	36.4	16.4	4.6

* See footnote 7 for a description of diagnostic categories used. Number of facilities reporting: all centers - 165; non-rural centers - 85; part rural centers - 60; rural centers - 20.

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